



Cabinet for Health and Family Services
Department for Medicaid Services
Weekly Membership Counts

Unduplicated Member Count (as of Run Date)
1,359,678

PlanType/Count	Incarceration	No Suspense	Total All
Aetna	45	221,109	221,154
Anthem	64	127,000	127,064
Humana	67	144,416	144,483
Passport	83	307,749	307,832
WellCare	98	440,811	440,909
FFS	2,422	115,813	118,235
Missing MCO	1		1
	2,780	1,356,898	1,359,678

Region/Plan Type	Aetna	Anthem	Humana	Passport	WellCare	FFS	Missing MCO Assignment	Total by Region
01	12,710	7,691	7,181	6,404	27,215	6,415		67,616
02	27,698	11,894	11,832	10,598	44,792	10,340		117,154
31	21,374	19,392	36,092	204,615	30,685	26,703	1	338,862
04	38,685	20,606	19,320	20,362	64,357	18,430		181,760
05	48,501	32,442	31,494	31,251	76,820	19,879		240,387
06	24,233	10,754	10,337	9,523	32,049	6,646		93,542
07	14,227	7,951	8,947	7,057	44,413	8,328		90,923
08	33,703	16,325	19,268	17,999	120,542	21,368		229,205
00	23	9	12	23	36	126		229
Total by Plan Type	221,154	127,064	144,483	307,832	440,909	118,235	1	1,359,678

**Note: If the Total All Count is different from Total by Plan Type it means a member is being counted in more than one Hold Type.

** If the Grand Total By Plan Type is different from the Total Count (as of Run Date), it means that there are overlapping Benefit Plan or PMP segments for those members across either one of the Plan Types.

The data is run from the weekly eligibility snapshot in the DSS at the Run Time listed. The data should very closely reflect what is in the MMIS as of Monday morning.

Members should have Medicaid Eligibility and have a PMP Assignment Plan (for MCO's only) to be counted towards the Plan Type.



Cabinet for Health and Family Services
Department for Medicaid Services
Weekly Membership Counts - Expansion

Unduplicated Member Count (as of Run Date)
442,874

PlanType/Count	Incarceration	No Suspense	Total All
Aetna	30	55,458	55,488
Anthem	55	63,942	63,997
Humana	60	69,172	69,232
Passport	73	110,363	110,436
WellCare	86	141,149	141,235
FFS	2,078	407	2,485
Missing MCO	1	0	1
	2,383	440,491	442,874

Region/Plan Type	Aetna	Anthem	Humana	Passport	WellCare	FFS	Missing MCO Assignment	Total by Region
01	3,062	4,025	3,424	3,067	8,696	137		22,411
02	6,534	5,451	5,533	4,624	14,559	164		36,865
31	9,367	9,828	15,730	62,490	12,985	1,055	1	111,456
04	9,174	10,211	9,393	9,371	19,381	233		57,763
05	10,956	16,567	15,876	14,347	23,150	417		81,313
06	5,386	5,304	4,873	4,376	10,662	115		30,716
07	3,267	4,193	4,616	3,307	14,350	110		29,843
08	7,737	8,417	9,782	8,851	37,443	218		72,448
00	5	1	5	3	9	36		59
Total By Plan Type	55,488	63,997	69,232	110,436	141,235	2,485	1	442,874

**Note: If the Total All Count is different from Total by Plan Type it means a member is being counted in more than one Hold Type. The data is run from the weekly eligibility snapshot in the DSS at the Run Time listed. The data should very closely is in the MMIS as of Monday morning.

If the Grand Total By Plan Type is different from the Total Count (as of Run Date), it means that there are overlapping Benefit Plan or PMP segments for those members across either one of the Plan Types.

Members should have Medicaid Eligibility and have a PMP Assignment Plan (for MCO's only) to be counted towards the Plan Type.